

INFORMATION SHEET

Please COMPLETE this information sheet and return to our office as soon as possible.

RE: Refinance of _____

GENERAL CLOSING INFORMATION:

- Full legal names (including suffix) or corporate name of Borrower: _____

- Marital status: _____ Spouses Name: _____
- Social Security # His: _____ Hers: _____

****Spouses MUST attend closing. Please notify us as soon as possible if this is not possible****

- If the borrower is an entity, please name all members, managers, shareholders, officers, etc:

- Preferred mailing address: _____
- Phone (cell, home, work): _____
- Email: _____
- Will you attend closing? _____ YES _____ NO

(Please note mailaway fees may apply**)**

HAZARD INSURANCE:

- Company: _____
- Agent Name: _____ Phone: _____

NEW LENDER INFORMATION:

- Company: _____
- Contact: _____ Phone: _____

PAYOFF INFORMATION

1st Mortgage:

Lender Name: _____ Phone No.: _____

Account No.: _____

2nd Mortgage:

Lender Name: _____ Phone No.: _____

Account No.: _____

- 1. The signatures below authorize the banks or lenders to provide payoff information to The Law Office of Anthony S. Privette.**
- 2. It is understood that the payoff will be sent via wire, unless otherwise instructed.**

_____ Date _____

Borrower

_____ Date _____

Borrower